



CHARLOTTE-MECKLENBURG POLICE DEPARTMENT

~PASSENGER VEHICLES for HIRE UNIT~

COMPANY OPERATING CERTIFICATE APPLICATION

Submit a completed application packet consisting of the following payments and enclosures. **Incomplete Applications, Documents or Enclosures will not be accepted. (Cash, Money Order, or Company Check ONLY)**

1. **\$475 Company Operating Certificate Fee** Non-refundable
2. **Company Operating Certificate Application** Completed, signed and dated that includes:
 - A. Owner Information Form (Complete one for each)
 - B. Metered Vehicle Layout/Color Scheme Form (For Metered Companies ONLY)
 - C. Driver Summary Form (List ALL Drivers)
 - D. Vehicle Summary Form (List ALL Vehicles)
 - E. Authority For Release Form
3. **(If Not Already On File)** A Certified copy of Articles, Bylaws, or Operating Agreement, if application submitted by a Business Enterprise.
4. **(For New Company Applications Only) Criminal Records *Only If asked to provide.** All court records must come from the respective Clerk of Criminal Court offices in the **STATE** (Not city or county) **outside North Carolina**. Faxed and Internet copies will not be accepted.
5. **(If Not Already On File) Driver's License(s)** For each Owner
6. **(If Not Already On File) Social Security Card(s)** For each Owner. Your Social Security Card must have your signature on it for it to be a valid document.
7. **(If Not Already On File) Immigration Documents** Certificate of Naturalization, Passports with INS 551 Stamps, I-9 Card with necessary work authorization stamp, Employment Authorization Card or Permanent Resident Card (Green Card).
8. **Fingerprint Card To be submitted initially and then at least once every three (3) years.** Fingerprint cards may be obtained from the Mecklenburg County Sheriff's Office. The purpose of the card should read: "PVH Permit". (1 completed card per Owner)
9. Metered (taxi) companies are required to have commercial "Taxi" tags for all vehicles. Nonmetered companies are required to have For Hire "Z" plates for all vehicles, unless providing Agency transportation with DSS and/or CMS, in which case you must provide a copy of your contract for the upcoming year.

Copies of this checklist, all applications and enclosures are available online at:

<http://charmeck.org/city/charlotte/CMPD/response-areas/SpecialEvents/TaxiandPassengerVehiclesforHire/Pages/default.aspx>

The Passenger Vehicle for Hire Office conducts all business by appointment **ONLY**:

Monday through Thursday, 8:00 AM -11:00 AM, and 1:00 PM - 4:00 PM.

Friday, 8:00 AM -11:00 AM

AJ Weckenman 704-432-5132; Dee Wallace 704-432-5130; Jay Mitchell 704-432-5139; KimAnnette Smith 704-432-5140

(Rev. 07/2017)



CHARLOTTE-MECKLENBURG POLICE DEPARTMENT

~PASSENGER VEHICLES for HIRE UNIT~

COMPANY OPERATING CERTIFICATE APPLICATION

| | | | | |
|---|---|--|--------------------------------|-------------|
| Company Name: | | | Date: | |
| Street Address: | | City: | State: | Zip: |
| Mailing Address (if different): | | City: | State: | Zip: |
| Company Email Address: | | | Primary Contact Person: | |
| Work Phone: | Cell Phone: | Fax Number: | | |
| Application Type | | | | |
| Check One: | <input type="checkbox"/> New <input type="checkbox"/> Renewal | | | |
| Check One: | <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Association <input type="checkbox"/> Corporation | | | |
| Check One: | <input type="checkbox"/> Metered <input type="checkbox"/> Non-Metered | | | |
| Operation of a passenger vehicle for hire in the City of Charlotte is governed by Chapter 22 of the Charlotte City Code. Applicants shall read and understand all requirements in Chapter 22 prior to applying for a company operating certificates. | | | | |
| Certification and Authorization | | | | |
| We, the undersigned applicant(s) certify that we submit this application in accordance with the provisions reflected in Chapter 22 of the Charlotte Code, the "Passenger Vehicles for Hire" ordinance. All information submitted in the application is neither false nor misleading and we understand that submitting, or causing to be submitted, false or misleading information is unlawful and shall be grounds for denial of an application. We are currently in compliance and will continue to comply with all requirements contained in the Passenger Vehicles for Hire Ordinance. | | | | |
| Owner 1 Print Name: _____ Signature: _____ Date: _____ | | Owner 2 Print Name: _____ Signature: _____ Date: _____ | | |
| Owner 3 Print Name: _____ Signature: _____ Date: _____ | | Owner 4 Print Name: _____ Signature: _____ Date: _____ | | |

Once we review your company application and conduct a preliminary background investigation, your company will be approved or denied. You will be contacted by phone, whether your application is approved or denied. If your application is denied, you will also receive a written notification of denial.

Company operating certificates must be renewed annually. In certain situations, when applying for a Company Operating Certificate renewal, you may be asked to provide some of the above items labeled "for new company applications only". All taxicab company operating certificates expire each year at midnight, July 31st. All other passenger-vehicle-for-hire company operating certificates expire annually at midnight, August 31st.



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COMPANY OWNER INFORMATION

(Complete one for each)

| | | | |
|---|-------------------------|---|---------------------|
| Company Name: | | Company Owner Name: | |
| Home Phone: | | Cell Phone: | |
| Email: | | Fax: | |
| Applicant Name: | Social Security Number: | Driver License Number and State: | Date of Birth: |
| | | | |
| Address Information (Street, City, State, ZIP): | | | # years at address: |
| | | | |
| | | | |
| Criminal History. Provide dates, locations, and dispositions of ALL arrests, convictions, incarcerations, probationary sentences, or traffic citations OF ANY KIND. Attach separate sheets to provide full documentation of all past civil and criminal activity, INCLUDING ALL OUT-OF-STATE activity. | | | |
| <input type="radio"/> NONE (Court statement of no record attached) | | <input type="radio"/> YES (Full documentation attached) | |
| Remarks: | | | |
| Applicant's Signature: | | | Date: |

(Rev. 07/2017)



CHARLOTTE-MECKLENBURG POLICE DEPARTMENT

~PASSENGER VEHICLES for HIRE UNIT~

METERED VEHICLE LAYOUT/COLOR SCHEME

| | | |
|---|---------------|---------------------------------------|
| Company Name: | | Date: |
| <p>Provide the uniform color scheme and logos painted or to be painted on Metered Vehicles.</p> <p>Attach a full color diagrammatic layout of a representative vehicle and include paint swatches of all proposed colors.</p> | | |
| | Primary Color | Secondary Color(s) (if applicable) |
| Hood | | |
| Roof | | |
| Trunk Lid | | |
| Sides | | |
| Lettering | | |



CHARLOTTE-MECKLENBURG POLICE DEPARTMENT

~PASSENGER VEHICLES for HIRE UNIT~

AFFILIATED DRIVER SUMMARY

| | Driver Name | Driver License Number & State | Driver Permit Number | Permit Expiration Date |
|---|-------------|----------------------------------|----------------------------|------------------------------|
| List All Drivers. | | | | |
| 1 | | | | |
| 2 | | | | |
| 3 | | | | |
| 4 | | | | |
| 5 | | | | |
| 6 | | | | |
| 7 | | | | |
| 8 | | | | |
| 9 | | | | |
| 10 | | | | |
| 11 | | | | |
| 12 | | | | |
| 13 | | | | |
| 14 | | | | |
| 15 | | | | |
| 16 | | | | |
| 17 | | | | |
| 18 | | | | |
| 19 | | | | |
| 20 | | | | |
| Reproduce additional copies of form to document all drivers. | | | | |
| Company Name: | | Signature: | | Date: |



CHARLOTTE-MECKLENBURG POLICE DEPARTMENT

~PASSENGER VEHICLES for HIRE UNIT~

AFFILIATED VEHICLES SUMMARY

| | Vehicle Number | Tag Number | VIN | Vehicle Owner Name | Copy Of Ins. On File (Yes/No) | Ins. Verified By Company Owner(s) (Yes/No) |
|--|----------------|------------|-----|--------------------|-------------------------------|--|
| List All Vehicles (company and independently owned). | | | | | | |
| 1 | | | | | | |
| 2 | | | | | | |
| 3 | | | | | | |
| 4 | | | | | | |
| 5 | | | | | | |
| 6 | | | | | | |
| 7 | | | | | | |
| 8 | | | | | | |
| 9 | | | | | | |
| 10 | | | | | | |
| 11 | | | | | | |
| 12 | | | | | | |
| 13 | | | | | | |
| 14 | | | | | | |
| 15 | | | | | | |
| 16 | | | | | | |
| 17 | | | | | | |
| 18 | | | | | | |
| Reproduce additional copies of form to document all vehicles. | | | | | | |
| Company Name: | | | | Signature: | | Date: |

AUTHORITY FOR RELEASE OF INFORMATION

"NATIONAL RECORD CHECK"

I authorize the North Carolina Department of Justice through the **State Bureau of Investigation**, Special Operations Division to perform a fingerprint search of the State's criminal history record file and a Fingerprint search of the **Federal Bureau of Investigations'** files for a national criminal history record check in connection with my application for taxi driver license with the **Charlotte-Mecklenburg Police Department** Pursuant to N.C.G.S. 160A-304 and ordinance.

(Type or Print legibly)

| | | | |
|----------------|------------|------------|--------------|
| _____ | _____ | _____ | _____ |
| Last Name | First Name | Middle | Maiden |
| ____/____/____ | _____ | Male _____ | Female _____ |
| Date of Birth | Race | | |

I understand that the North Carolina State Bureau of Investigation, Special Operations Division, the Federal Bureau of Investigation, and its officials and employees shall not be held legally accountable in any way for providing this information to the above named agency, and I hereby release said agency and persons from any and all liability which may be incurred as a result of furnishing such information. I further understand that the above named agency cannot provide a hard copy of the results of this criminal history record check to me.

| | |
|-----------------------|------------------|
| _____ | _____/_____/____ |
| Applicant's Signature | Date |

The fingerprint card must be accompanied with a transmittal letter from the Authorized Official or Individual requesting Criminal History Record Information. This Authority for Release form must be kept on file for one year.
The request must be mailed to: State Bureau of Investigation, Criminal Information and Identification Section,
Attn.: Applicant Unit, PO Box 29500, Raleigh, NC 27626-0500

ORI # NCO600100-Charlotte-Mecklenburg Police Dept. – Taxi Drivers National Fingerprint Card Check - \$38.00